## **Building Department**



1700 Convention Center Drive, 2<sup>nd</sup> FL Miami Beach, Florida 33139

Telephone: 305-673-7610

http://www.miamibeachfl.gov/city-hall/building/

## Uniform Notice of a Low-Voltage Alarm System Project and Statement of Inspection

Low Voltage Alarm Label # NOTE: A label is valid for one (1) year after the date of purchase			
Property Owner:			
Property Address:			•
Tax folio #:			
City:	State:	Zip:	
Phone Number:			
E-mail Address:			
Contractor's Name:			
Contractor's Address:			
City:	State:	Zip:	_
Phone Number:			
Contractor's License Number:			
Date Project Completed:		<u> </u>	
Scope of Work :			
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Notice hereby given that a low-voltage alarm system project has been completed at the address specified above. I certify that all of the foregoing information is true and accurate.  I, <u>CONTRACTOR'S NAME:</u> , having performed and approved the required inspections hereby attest that to the best of my knowledge, belief and professional judgment, the system has been installed in compliance with			
all applicable codes and regulation	ns.		
Contractor's Signature			
, and the second			
STATE OF, (	COUNTY OF		
	ladaad bafara waa bu		de a de
The foregoing instrument was acknown personally known to me or has prod	wiedged before me by	as identification	, who is
personally known to me or has prod	uceu	, as identification	1.
Witness my signature and official sea	al this day of		, in the County and State aforesaid.
	My Commission Expires:		
Notary			
Fax this completed notice to: 305	<u>5-673-7857</u>		